

The survey identifies eight police officers killed and nine wounded by assault weapons during this 5-month period. It documents 20 separate incidents in which at least 43 law enforcement officers were confronted by assailants armed with assault weapons. This figure only includes incidents where these weapons posed an imminent threat to the officers, not incidents where assault weapons were found on suspects or confiscated during the course of an investigation or arrest. Twelve of the 20 incidents involved AK-47 assault rifles or TEC-9 assault pistols, both of which are explicitly banned by the Federal legislation. The study finds that at least 1 in 10 law enforcement officers killed in the line of duty will be felled by assault weapons.

I urge my colleagues to read this report, and seriously consider the public safety and public policy issues involved in this issue. We should heed the voices of the many law enforcement groups which strongly support the ban. We should not repeal the assault weapon ban before it is given chance to make a difference. •

CONGRESSIONAL AWARD ACT AMENDMENTS OF 1995

Mr. DOLE. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 193, S. 1267.

The PRESIDING OFFICER. The clerk will report.

The assistant legislative clerk read as follows:

A bill (S. 1267) to amend the Congressional Award Act to revise and extend authorities for the Congressional Award Board.

The PRESIDING OFFICER. Is there objection to the immediate consideration of the bill?

There being no objection, the Senate proceeded to consider the bill.

Mr. DOLE. Mr. President, I ask unanimous consent that the bill be deemed read a third time, passed, the motion to reconsider be laid upon the table, and that any statements relating to the bill be placed at the appropriate place in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

So the bill (S. 1267) was deemed read the third time and passed, as follows:

S. 1267

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Congressional Award Act Amendments of 1995".

SEC. 2. EXTENSION OF REQUIREMENTS REGARDING FINANCIAL OPERATIONS OF CONGRESSIONAL AWARD PROGRAM; NONCOMPLIANCE WITH REQUIREMENTS.

Section 5(c)(2)(A) of the Congressional Award Act (2 U.S.C. 804(c)(2)(A)) is amended by striking "and 1994" and inserting "1994, 1995, 1996, and 1997".

SEC. 3. TERMINATION.

Section 9 of the Congressional Award Act (2 U.S.C. 808) is amended by striking "October 1, 1995" and inserting "October 1, 1998".

WEEK WITHOUT VIOLENCE

Mr. DOLE. Mr. President, I ask unanimous consent that the Judiciary Committee be discharged from further consideration of Senate Resolution 180, a resolution designating October 15-21, 1995 as the "Week Without Violence"; that the Senate then proceed to its immediate consideration; that the resolution and preamble be agreed to, en bloc; that the motion to reconsider be laid upon the table; and that any statements relating thereto appear in the RECORD at the appropriate place.

The PRESIDING OFFICER. Without objection, it is so ordered.

So the resolution (S. Res. 180) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, is as follows:

S. RES. 180

Whereas the Week Without Violence, a public-awareness campaign designed to inspire alternatives to the problem of violence in our society, falls on October 15, 1995, through October 21, 1995;

Whereas the prevalence of violence in our society has become increasingly disturbing, as reflected by the fact that 2,000,000 people are injured each year as a result of violent crime, with a staggering 24,500 reported murders in 1993 and with losses from medical expenses, lost pay, property, and other crime-related costs totaling billions of dollars each year;

Whereas studies show that violence against women in their own homes causes more total injuries to women than rape, muggings, and car accidents combined and that one-half of all women who are murdered in the United States are killed by their male partners;

Whereas violence has invaded our homes and communities and is exacting a terrible toll on our country's youth;

Whereas children below the age of 12 are the victims of 1 in 4 violent juvenile victimizations reported to law enforcement, adding up to roughly 600,000 violent incidents involving children under the age of 12 each year;

Whereas studies show that childhood abuse and neglect increases a child's odds of future delinquency and adult criminality and that today's juvenile victims are tomorrow's repeat offenders;

Whereas the risk of violent victimization of children and young adults has increased in recent years;

Whereas according to FBI statistics, on a typical day in 1992, 7 juveniles were murdered;

Whereas from 1985 to 1992, nearly 17,000 persons under the age of 18 were murdered;

Whereas the YWCA, as the oldest women's membership movement in the United States, continues its long history as an advocate for women's rights, racial justice, and non-violent approaches to resolving many of society's most troubling problems;

Whereas the chapters of the YWCA provide a wide range of valuable programs for women all across the country, including job training programs, child care, battered women's shelters, support programs for victims of rape and sexual assault, and legal advocacy;

Whereas the YWCA Week Without Violence campaign will take an active approach to confront the problem of violence head-on, with a grassroots effort to prevent violence from making further inroads into our schools, community organizations, workplaces, neighborhoods, and homes;

Whereas the Week Without Violence will provide a forum for examining viable solu-

tions for keeping violence against women, men, and children out of our homes and communities;

Whereas national and local groups will inspire and educate our communities about effective alternatives to violence; and

Whereas the YWCA Week Without Violence is both a challenge and a clarion call to all Americans: Now, therefore, be it

Resolved, That the Senate encourages all Americans to spend 7 days without committing, condoning, or contributing to violence and proclaims the week of October 15, 1995, through October 21, 1995, as the "Week Without Violence".

Mr. HATCH. Mr. President, I am pleased to rise today to support passage of Senate Resolution 180, declaring next week the "Week Without Violence." This week is part of what I hope will be a tremendous public awareness campaign to educate Americans about the threat of violence in our society and to offer alternatives to this grave problem.

None of us is immune from the violence in our communities. In rural and urban areas across this country, men, women, and children are at risk. They are at risk not just on the streets, but all too often in their homes or in their schools.

I enthusiastically join Senator BRADLEY and others in supporting this resolution; it calls on Americans to spend a week without committing, condoning, ignoring, or contributing to violence.

Teaching people that violence is not acceptable and educating victims of violence to seek out protection will save lives. The issue of violence deserves national attention and demands community involvement. I hope and believe that the focus of the "Week Without Violence" will be a small but significant step in decreasing the scourge of violence in our society.

RYAN WHITE CARE REAUTHORIZATION ACT OF 1995—MESSAGE FROM THE HOUSE

Mr. DOLE. Mr. President, I ask that the Chair lay before the Senate a message from the House of Representatives on S. 641, a bill to reauthorize the Ryan White CARE Act of 1990, and for other purposes.

The PRESIDING OFFICER laid before the Senate the following message from the House of Representatives:

Resolved, That the bill from the Senate (S. 641) entitled "An Act to reauthorize the Ryan White CARE Act of 1990, and for other purposes", do pass with the following amendments:

Strike out all after the enacting clause, and insert:

SECTION 1. SHORT TITLE.

This Act may be cited as the "Ryan White CARE Act Amendments of 1995".

SEC. 2. REFERENCES.

Whenever in this Act an amendment is expressed in terms of an amendment to a section or other provision, the reference shall be considered to be made to that section or other provision of the Public Health Service Act (42 U.S.C. 201 et seq.).

TITLE I—EMERGENCY RELIEF FOR AREAS WITH SUBSTANTIAL NEED FOR SERVICES

SEC. 101. ESTABLISHMENT OF PROGRAM OF GRANTS.

(a) NUMBER OF CASES; DELAYED APPLICABILITY.—Effective October 1, 1996, section 2601(a) (42 U.S.C. 300ff-11) is amended—

(1) by striking “subject to subsection (b)” and inserting “subject to subsections (b) through (d)”; and

(2) by striking “metropolitan area” and all that follows and inserting the following: “metropolitan area for which there has been reported to the Director of the Centers for Disease Control and Prevention a cumulative total of more than 2,000 cases of acquired immune deficiency syndrome for the most recent period of five calendar years for which such data are available.”.

(b) OTHER PROVISIONS REGARDING ELIGIBILITY.—Section 2601 (42 U.S.C. 300ff-11) is amended by adding at the end thereof the following subsections:

“(c) REQUIREMENTS REGARDING POPULATION.—

“(1) NUMBER OF INDIVIDUALS.—

“(A) IN GENERAL.—Except as provided in subparagraph (B), the Secretary may not make a grant under this section for a metropolitan area unless the area has a population of 500,000 or more individuals.

“(B) LIMITATION.—Subparagraph (A) does not apply to any metropolitan area that was an eligible area under this part for fiscal year 1995 or any prior fiscal year.

“(2) GEOGRAPHIC BOUNDARIES.—For purposes of eligibility under this part, the boundaries of each metropolitan area are the boundaries that were in effect for the area for fiscal year 1994.

“(d) CONTINUED STATUS AS ELIGIBLE AREA.—Notwithstanding any other provision of this section, a metropolitan area that was an eligible area under this part for fiscal year 1996 is an eligible area for fiscal year 1997 and each subsequent fiscal year.”.

(c) CONFORMING AMENDMENT REGARDING DEFINITION OF ELIGIBLE AREA.—Section 2607(1) (42 U.S.C. 300ff-17(1)) is amended by striking “The term” and all that follows and inserting the following: “The term ‘eligible area’ means a metropolitan area meeting the requirements of section 2601 that are applicable to the area.”.

SEC. 102. HIV HEALTH SERVICES PLANNING COUNCIL.

(a) ESTABLISHMENT.—Section 2602(b)(1) (42 U.S.C. 300ff-12(b)(1)) is amended—

(1) in subparagraph (A), by inserting before the semicolon the following: “, including federally qualified health centers”;

(2) in subparagraph (D), by inserting before the semicolon the following: “and providers of services regarding substance abuse”;

(3) in subparagraph (G), by inserting before the semicolon the following: “and historically underserved groups and subpopulations”;

(4) in subparagraph (I), by inserting before the semicolon the following: “, including the State medicaid agency and the agency administering the program under part B”;

(5) in subparagraph (J), by striking “and” after the semicolon;

(6) by striking subparagraph (K); and

(7) by adding at the end the following subparagraphs:

“(K) grantees under section 2671, or, if none are operating in the area, representatives of organizations in the area with a history of serving children, youth, women, and families living with HIV; and

“(L) grantees under other HIV-related Federal programs.”.

(b) DUTIES.—Section 2602(b)(3) (42 U.S.C. 300ff-12(b)(3)) is amended—

(1) by striking “The planning” in the matter preceding subparagraph (A) and all that follows through the semicolon at the end of subparagraph (A) and inserting the following: “The

planning council under paragraph (1) shall carry out the following:

“(A) Establish priorities for the allocation of funds within the eligible area based on the following factors:

“(i) Documented needs of the HIV-infected population.

“(ii) Cost and outcome effectiveness of proposed strategies and interventions, to the extent that such data are reasonably available.

“(iii) Priorities of the HIV-infected communities for which the services are intended.

“(iv) Availability of other governmental and nongovernmental resources.”;

(2) in subparagraph (B)—

(A) by striking “develop” and inserting “Develop”; and

(B) by striking “; and” and inserting a period;

(3) in subparagraph (C)—

(A) by striking “assess” and inserting “Assess”;

(B) by striking “rapidly”; and

(C) by inserting before the period the following: “, and assess the effectiveness, either directly or through contractual arrangements, of the services offered in meeting the identified needs”; and

(4) by adding at the end the following subparagraphs:

“(D) Participate in the development of the statewide coordinated statement of need initiated by the State health department (where it has been so initiated).

“(E) Obtain input on community needs through conducting public meetings.”.

(c) GENERAL PROVISIONS.—Section 2602(b) (42 U.S.C. 300ff-12(b)) is amended by adding at the end the following paragraph:

“(4) GENERAL PROVISIONS.—

“(A) COMPOSITION OF COUNCIL.—The planning council under paragraph (1) shall (in addition to requirements under such paragraph) reflect in its composition the demographics of the epidemic in the eligible area involved, with particular consideration given to disproportionately affected and historically underserved groups and subpopulations. Nominations for membership on the council shall be identified through an open process, and candidates shall be selected based on locally delineated and publicized criteria. Such criteria shall include a conflict-of-interest standard for each nominee.

“(B) CONFLICTS OF INTEREST.—

“(i) The planning council under paragraph (1) may not be directly involved in the administration of a grant under section 2601(a). With respect to compliance with the preceding sentence, the planning council may not designate (or otherwise be involved in the selection of) particular entities as recipients of any of the amounts provided in the grant.

“(ii) An individual may serve on the planning council under paragraph (1) only if the individual agrees to comply with the following:

“(I) If the individual has a financial interest in an entity, and such entity is seeking amounts from a grant under section 2601(a), the individual will not, with respect to the purpose for which the entity seeks such amounts, participate (directly or in an advisory capacity) in the process of selecting entities to receive such amounts for such purpose.

“(II) In the case of a public or private entity of which the individual is an employee, or a public or private organization of which the individual is a member, the individual will not participate (directly or in an advisory capacity) in the process of making any decision that relates to the expenditure of a grant under section 2601(a) for such entity or organization or that otherwise directly affects the entity or organization.”.

SEC. 103. TYPE AND DISTRIBUTION OF GRANTS.

(a) FORMULA GRANTS BASED ON RELATIVE NEED OF AREAS.—Section 2603(a) (42 U.S.C. 300ff-13(a)) is amended—

(1) in paragraph (1)—

(A) in the second sentence, by inserting “, subject to paragraph (4)” before the period; and

(B) by adding at the end the following sentence: “Grants under this paragraph for a fiscal year shall be disbursed not later than 60 days after the date on which amounts appropriated under section 2677 become available for the fiscal year, subject to any waivers under section 2605(d).”;

(2) in paragraph (2), by amending the paragraph to read as follows:

“(2) ALLOCATIONS.—Of the amount available under section 2677 for a fiscal year for making grants under section 2601(a)—

“(A) the Secretary shall reserve 50 percent for making grants under paragraph (1) in amounts determined in accordance with paragraph (3); and

“(B) the Secretary shall, after compliance with subparagraph (A), reserve such funds as may be necessary to carry out paragraph (4).”; and

(3) by adding at the end the following paragraph:

“(4) MAXIMUM REDUCTION IN GRANT.—In the case of any eligible area for which a grant under paragraph (1) was made for fiscal year 1995, the Secretary, in making grants under such paragraph for the area for the fiscal years 1996 through 2000, shall (subject to the extent of the amount available under section 2677 for the fiscal year involved for making grants under section 2601(a)) ensure that the amounts of the grants do not, relative to such grant for the area for fiscal year 1995, constitute a reduction of more than the following, as applicable to the fiscal year involved:

“(A) 1 percent, in the case of fiscal year 1996.

“(B) 2 percent, in the case of fiscal year 1997.

“(C) 3 percent, in the case of fiscal year 1998.

“(D) 4 percent, in the case of fiscal year 1999.

“(E) 5 percent, in the case of fiscal year 2000.”.

(b) SUPPLEMENTAL GRANTS.—Section 2603(b) (42 U.S.C. 300ff-13(b)) is amended—

(1) in paragraph (1)—

(A) in the matter preceding subparagraph (A), by striking “Not later than” and all that follows through “section 2605(b)—” and inserting the following: “After allocating in accordance with subsection (a) the amounts available under section 2677 for grants under section 2601(a) for a fiscal year, the Secretary, in carrying out section 2601(a), shall from the remaining amounts make grants to eligible areas described in this paragraph. Such grants shall be disbursed not later than 150 days after the date on which amounts appropriated under section 2677 become available for the fiscal year. An eligible area described in this paragraph is an eligible area whose application under section 2605(b)—”; and

(B) in subparagraph (D), by striking “and” after the semicolon;

(C) in subparagraph (E), by striking the period at the end and inserting “; and”; and

(D) by adding at the end thereof the following subparagraph:

“(F) demonstrates the manner in which the proposed services are consistent with the local needs assessment and the statewide coordinated statement of need.”; and

(2)(A) by redesignating paragraphs (2) through (4) as paragraphs (3) through (5), respectively; and

(B) by inserting after paragraph (1) the following paragraph:

“(2) PRIORITY.—

“(A) SEVERE NEED.—In determining severe need in accordance with paragraph (1)(B), the Secretary shall give priority consideration in awarding grants under this subsection to eligible areas that (in addition to complying with paragraph (1)) demonstrate a more severe need based on the prevalence in the eligible area of—

“(i) sexually transmitted diseases, substance abuse, tuberculosis, severe mental illness, or other conditions determined relevant by the Secretary, which significantly affect the impact of HIV disease;

“(ii) subpopulations with HIV disease that were previously unknown in such area; or
 “(iii) homelessness.

“(B) PREVALENCE.—In determining prevalence of conditions under subparagraph (A), the Secretary shall use data on the prevalence of the conditions described in such subparagraph among individuals with HIV disease (except that, in the case of an eligible area for which such data are not available, the Secretary shall use data on the prevalences of the conditions in the general population of such area).”

(C) ADDITIONAL REQUIREMENTS FOR GRANTS.—Section 2603 (42 U.S.C. 300ff-13) is amended by adding at the end the following subsection:

“(c) COMPLIANCE WITH PRIORITIES OF HIV PLANNING COUNCIL.—Notwithstanding any other provision of this part, the Secretary, in carrying out section 2601(a), may not make any grant under subsection (a) or (b) to an eligible area unless the application submitted by such area under section 2605 for the grant involved demonstrates that the grants made under subsections (a) and (b) to the area for the preceding fiscal year (if any) were expended in accordance with the priorities applicable to such year that were established, pursuant to section 2602(b)(3)(A), by the planning council serving the area.”

SEC. 104. USE OF AMOUNTS.

Section 2604 (42 U.S.C. 300ff-14) is amended—
 (1) in subsection (b)—

(A) in paragraph (1)(A), by striking “including case management and comprehensive treatment services, for individuals” and inserting the following: “including HIV-related comprehensive treatment services (including treatment education and measures for the prevention and treatment of opportunistic infections), case management, and substance abuse treatment and mental health treatment, for individuals”;

(B) in paragraph (2)(A)—

(i) by inserting after “nonprofit private entities,” the following: “or private for-profit entities if such entities are the only available provider of quality HIV care in the area,”; and

(ii) by striking “and homeless health centers” and inserting “homeless health centers, substance abuse treatment programs, and mental health programs”;

(C) by adding at the end the following paragraph:

“(3) PRIORITY FOR WOMEN, INFANTS AND CHILDREN.—For the purpose of providing health and support services to infants, children, and women with HIV disease, the chief elected official of an eligible area shall use, of the grants made for the area under section 2601(a) for a fiscal year, not less than the percentage constituted by the ratio of the population in such area of infants, children, and women with acquired immune deficiency syndrome to the general population in such area of individuals with such syndrome, or 15 percent, whichever is less. In expending the funds reserved under the preceding sentence for a fiscal year, the chief elected official shall give priority to providing, for pregnant women, measures to prevent the perinatal transmission of HIV.”; and

(2) in subsection (e), by adding at the end thereof the following sentence: “In the case of entities to which such officer allocates amounts received by the officer under the grant, the officer shall ensure that, of the aggregate amount so allocated, the total of the expenditures by such entities for administrative expenses does not exceed 10 percent (without regard to whether particular entities expend more than 10 percent for such expenses).”

SEC. 105. APPLICATION.

Section 2605 (42 U.S.C. 300ff-15) is amended—
 (1) in subsection (a)—

(A) in paragraph (1)(B), by striking “1-year period” and all that follows through “eligible area” and inserting “preceding fiscal year”;

(B) in paragraph (4), by striking “and” at the end thereof;

(C) in paragraph (5), by striking the period at the end thereof and inserting “; and”;

(D) by adding at the end thereof the following paragraph:

“(6) that the applicant will participate in the process for the statewide coordinated statement of need (where it has been initiated by the State), and will ensure that the services provided under the comprehensive plan are consistent with such statement.”;

(2) in subsection (b)—

(A) in the subsection heading, by striking “ADDITIONAL”; and

(B) in the matter preceding paragraph (1), by striking “additional”;

(3) by redesignating subsections (c) and (d) as subsections (d) and (e), respectively; and

(4) by inserting after subsection (b), the following subsection:

“(c) SINGLE APPLICATION.—Upon the request of the chief elected official of an eligible area, the Secretary may authorize the official to submit a single application through which the official simultaneously requests a grant pursuant to subsection (a) of section 2603 and a grant pursuant to subsection (b) of such section. The Secretary may establish such criteria for carrying out this subsection as the Secretary determines to be appropriate.”

SEC. 106. TECHNICAL ASSISTANCE; PLANNING GRANTS.

Section 2606 (42 U.S.C. 300ff-16) is amended—
 (1) by inserting before “The Administrator” the following: “(a) IN GENERAL.—”;

(2) by striking “may, beginning” and all that follows through “title,” and inserting “(referred to in this section as the ‘Administrator’) shall”;

(3) by adding at the end the following subsection:

“(b) PLANNING GRANTS REGARDING INITIAL ELIGIBILITY FOR GRANTS.—

“(1) ADVANCE PAYMENTS ON FIRST-YEAR FORMULA GRANTS.—With respect to a fiscal year (referred to in this subsection as the ‘planning year’), if a metropolitan area has not previously received a grant under section 2601 and the Administrator reasonably projects that the area will be eligible for such a grant for the subsequent fiscal year, the Administrator may make a grant for the planning year for the purpose of assisting the area in preparing for the responsibilities of the area in carrying out activities under this part.

“(2) REQUIREMENTS.—

“(A) IN GENERAL.—A grant under paragraph (1) for a planning year shall be made directly to the chief elected official of the city or urban county that administers the public health agency to which section 2602(a)(1) is projected to apply for purposes of such paragraph. The grant may not be made in an amount exceeding \$75,000.

“(B) OFFSETTING REDUCTION IN FIRST FORMULA GRANT.—In the case of a metropolitan area that has received a grant under paragraph (1) for a planning year, the first grant made pursuant to section 2603(a) for such area shall be reduced by an amount equal to the amount of the grant under such paragraph for the planning year. With respect to amounts resulting from reductions under the preceding sentence for a fiscal year, the Secretary shall use such amounts to make grants under section 2603(a) for the fiscal year, subject to ensuring that none of such amounts are provided to any metropolitan area for which such a reduction was made for the fiscal year.

“(3) FUNDING.—Of the amounts available under section 2677 for a fiscal year for carrying out this part, the Administrator may reserve not more than 1 percent for making grants under paragraph (1).”

TITLE II—CARE GRANT PROGRAM

SEC. 201. GENERAL USE OF GRANTS.

Section 2612 (42 U.S.C. 300ff-22) is amended to read as follows:

“SEC. 2612. GENERAL USE OF GRANTS.

“(a) IN GENERAL.—A State may use amounts provided under grants made under this part for the following:

“(1) To provide the services described in section 2604(b)(1) for individuals with HIV disease.

“(2) To provide to such individuals treatments that in accordance with section 2616 have been determined to prolong life or prevent serious deterioration of health.

“(3) To provide home- and community-based care services for such individuals in accordance with section 2614.

“(4) To provide assistance to assure the continuity of health insurance coverage for such individuals in accordance with section 2615.

“(5) To establish and operate consortia under section 2613 within areas most affected by HIV disease, which consortia shall be designed to provide a comprehensive continuum of care to individuals and families with such disease in accordance with such section.

“(b) PRIORITY FOR WOMEN, INFANTS AND CHILDREN.—For the purpose of providing health and support services to infants, children, and women with HIV disease, a State shall use, of the funds allocated under this part to the State for a fiscal year, not less than the percentage constituted by the ratio of the population in the State of infants, children, and women with acquired immune deficiency syndrome to the general population in the State of individuals with such syndrome, or 15 percent, whichever is less. In expending the funds reserved under the preceding sentence for a fiscal year, the State shall give priority to providing, for pregnant women, measures to prevent the perinatal transmission of HIV.”

SEC. 202. GRANTS TO ESTABLISH HIV CARE CONSORTIA.

Section 2613 (42 U.S.C. 300ff-23) is amended—
 (1) in subsection (a)—

(A) in paragraph (1), by inserting “(or private for-profit providers or organizations if such entities are the only available providers of quality HIV care in the area)” after “nonprofit private,”; and

(B) in paragraph (2)(A)—

(i) by inserting “substance abuse treatment, mental health treatment,” after “nursing,”; and

(ii) by inserting after “monitoring,” the following: “measures for the prevention and treatment of opportunistic infections, treatment education for patients (provided in the context of health care delivery).”;

(2) in subsection (c)(2)—

(A) in clause (ii) of subparagraph (A), by striking “and” after the semicolon;

(B) in subparagraph (B), by striking the period at the end and inserting “; and”;

(C) by adding after subparagraph (B) the following subparagraph:

“(C) grantees under section 2671, or, if none are operating in the area, representatives in the area of organizations with a history of serving children, youth, women, and families living with HIV.”

SEC. 203. PROVISION OF TREATMENTS.

Section 2616(a) (42 U.S.C. 300ff-26(a)) is amended—

(1) by striking “may use amounts” and inserting “shall use a portion of the amounts”;

(2) by striking “section 2612(a)(4)” and inserting “section 2612(a)(2)”;

(3) by inserting before the period the following: “, including measures for the prevention and treatment of opportunistic infections”.

SEC. 204. ADDITIONAL REQUIREMENTS FOR GRANTS.

(a) FINDINGS.—The Congress finds as follows:

(1) Research studies have demonstrated that administration of antiviral medication during pregnancy can significantly reduce the transmission of the human immunodeficiency virus (commonly known as HIV) from an infected mother to her baby.

(2) The Centers for Disease Control and Prevention have recommended that all pregnant

women receive HIV counseling; voluntary, confidential HIV testing; and appropriate medical treatment (including antiviral therapy) and support services.

(3) The provision of such testing without access to such counseling, treatment, and services will not improve the health of the woman or the child.

(4) The provision of such counseling, testing, treatment, and services can reduce the number of pediatric cases of acquired immune deficiency syndrome, can improve access to and provision of medical care for the woman, and can provide opportunities for counseling to reduce transmission among adults.

(5) The provision of such counseling, testing, treatment, and services can reduce the overall cost of pediatric cases of acquired immune deficiency syndrome.

(6) The cancellation or limitation of health insurance or other health coverage on the basis of HIV status should be impermissible under applicable law. Such cancellation or limitation could result in disincentives for appropriate counseling, testing, treatment, and services.

(7) For the reasons specified in paragraphs (1) through (6)—

(A) mandatory counseling and voluntary testing of pregnant women should be the standard of care; and

(B) the relevant medical organizations as well as public health officials should issue guidelines making such counseling and testing the standard of care.

(b) **ADDITIONAL REQUIREMENTS FOR GRANTS.**—Part B (42 U.S.C. 300ff-21 et seq.) is amended—

(1) in section 2611, by adding at the end the following sentence: "The authority of the Secretary to provide grants under this part is subject to section 2673D (relating to the testing of pregnant women and newborn infants)."; and

(2) by inserting after section 2616 the following section:

"SEC. 2616A. REQUIREMENT REGARDING HEALTH INSURANCE.

"(a) **IN GENERAL.**—Subject to subsection (c), the Secretary shall not make a grant under this part to a State unless the State has in effect a statute or regulations regulating insurance that imposes the following requirements:

"(1) That, if health insurance is in effect for an individual, the insurer involved may not (without the consent of the individual) discontinue the insurance, or alter the terms of the insurance (except as provided in paragraph (3)), solely on the basis that the individual is infected with HIV disease or solely on the basis that the individual has been tested for the disease.

"(2) That paragraph (1) does not apply to an individual who, in applying for the health insurance involved, knowingly misrepresented any of the following:

"(A) The HIV status of the individual.

"(B) Facts regarding whether the individual has been tested for HIV disease.

"(C) Facts regarding whether the individual has engaged in any behavior that places the individual at risk for the disease.

"(3) That paragraph (1) does not apply to any reasonable alteration in the terms of health insurance for an individual with HIV disease that would have been made if the individual had a serious disease other than HIV disease.

"(b) **REGULATION OF HEALTH INSURANCE.**—A statute or regulation shall be deemed to regulate insurance for purposes of this section only to the extent that it is treated as regulating insurance for purposes of section 514(b)(2) of the Employee Retirement Income Security Act of 1974.

"(c) **APPLICABILITY OF REQUIREMENT.**—

"(1) **IN GENERAL.**—Except as provided in paragraph (2), this section applies upon the expiration of the 120-day period beginning on the date of the enactment of the Ryan White CARE Act Amendments of 1995.

"(2) **DELAYED APPLICABILITY FOR CERTAIN STATES.**—In the case of the State involved, if the

Secretary determines that a requirement of this section cannot be implemented in the State without the enactment of State legislation, then such requirement applies to the State on and after the first day of the first calendar quarter that begins after the close of the first regular session of the State legislature that begins after the date of the enactment of the Ryan White CARE Act Amendments of 1995. For purposes of the preceding sentence, in the case of a State that has a 2-year legislative session, each year of such session is deemed to be a separate regular session of the State legislature."

(c) **TESTING OF NEWBORNS; PRENATAL TESTING.**—Part D (42 U.S.C. 300ff-71 et seq.) is amended by inserting before section 2674 the following sections:

"SEC. 2673C. TESTING OF PREGNANT WOMEN AND NEWBORN INFANTS; PROGRAM OF GRANTS.

"(a) **PROGRAM OF GRANTS.**—The Secretary may make grants to States described in subsection (b) for the following purposes:

"(1) Making available to pregnant women appropriate counseling on HIV disease.

"(2) Making available to such women testing for such disease.

"(3) Testing newborn infants for such disease.

"(4) In the case of newborn infants who test positive for such disease, making available counseling on such disease to the parents or other legal guardians of the infant.

"(5) Collecting data on the number of pregnant women and newborn infants in the State who have undergone testing for such disease.

"(b) **ELIGIBLE STATES.**—Subject to subsection (c), a State referred to in subsection (a) is a State that has in effect, in statute or through regulations, the following requirements:

"(1) In the case of newborn infants who are born in the State and whose biological mothers have not undergone prenatal testing for HIV disease, that each such infant undergo testing for such disease.

"(2) That the results of such testing of a newborn infant be promptly disclosed in accordance with the following, as applicable to the infant involved:

"(A) To the biological mother of the infant (without regard to whether she is the legal guardian of the infant).

"(B) If the State is the legal guardian of the infant:

"(i) To the appropriate official of the State agency with responsibility for the care of the infant.

"(ii) To the appropriate official of each authorized agency providing assistance in the placement of the infant.

"(iii) If the authorized agency is giving significant consideration to approving an individual as a foster parent of the infant, to the prospective foster parent.

"(iv) If the authorized agency is giving significant consideration to approving an individual as an adoptive parent of the infant, to the prospective adoptive parent.

"(C) If neither the biological mother nor the State is the legal guardian of the infant, to another legal guardian of the infant.

"(3) That, in the case of prenatal testing for HIV disease that is conducted in the State, the results of such testing be promptly disclosed to the pregnant woman involved.

"(4) That, in disclosing the test results to an individual under paragraph (2) or (3), appropriate counseling on the human immunodeficiency virus be made available to the individual (except in the case of a disclosure to an official of a State or an authorized agency).

"(c) **LIMITATION REGARDING AVAILABILITY OF GRANT FUNDS.**—With respect to an activity described in any of paragraphs (1) through (4) of subsection (b), the requirement established by a State under such subsection that the activity be carried out applies for purposes of this section only to the extent that the following sources of funds are available for carrying out the activity:

"(1) Federal funds provided to the State in grants under subsection (a).

"(2) Funds that the State or private entities have elected to provide, including through entering into contracts under which health benefits are provided. This section does not require any entity to expend non-Federal funds.

"(d) **DEFINITIONS.**—For purposes of this section, the term 'authorized agency', with respect to the placement of a child (including an infant) for whom a State is a legal guardian, means an entity licensed or otherwise approved by the State to assist in such placement.

"(e) **AUTHORIZATION OF APPROPRIATIONS.**—For the purpose of carrying out this section, there is authorized to be appropriated \$10,000,000 for each of the fiscal years 1996 through 2000.

"SEC. 2673D. TESTING OF PREGNANT WOMEN AND NEWBORN INFANTS; CONTINGENT REQUIREMENT REGARDING STATE GRANTS UNDER PART B.

"(a) **DETERMINATION BY SECRETARY.**—During the first 30 days following the expiration of the 2-year period beginning on the date of the enactment of the Ryan White CARE Act Amendments of 1995, the Secretary shall publish in the Federal Register a determination of whether it has become a routine practice in the provision of health care in the United States to carry out each of the activities described in paragraphs (1) through (4) of section 2673C(b). In making the determination, the Secretary shall consult with the States and with other public or private entities that have knowledge or expertise relevant to the determination.

"(b) **CONTINGENT APPLICABILITY.**—

"(1) **IN GENERAL.**—If the determination published in the Federal Register under subsection (a) is that (for purposes of such subsection) the activities involved have become routine practices, paragraph (2) applies on and after the expiration of the 18-month period beginning on the date on which the determination is so published.

"(2) **REQUIREMENT.**—Subject to subsection (c), the Secretary shall not make a grant under part B to a State unless the State meets not less than one of the following requirements:

"(A) The State has in effect, in statute or through regulations, the requirements specified in paragraphs (1) through (4) of section 2673C(b).

"(B) The State demonstrates that, of the newborn infants born in the State during the most recent 1-year period for which the data are available, the HIV antibody status of 95 percent of the infants is known.

"(c) **LIMITATION REGARDING AVAILABILITY OF FUNDS.**—With respect to an activity described in any of paragraphs (1) through (4) of section 2673C(b), the requirements established by a State under subsection (b)(2)(A) that the activity be carried out applies for purposes of this section only to the extent that the following sources of funds are available for carrying out the activity:

"(1) Federal funds provided to the State in grants under part B.

"(2) Federal funds provided to the State in grants under section 2673C.

"(3) Funds that the State or private entities have elected to provide, including through entering into contracts under which health benefits are provided. This section does not require any entity to expend non-Federal funds."

SEC. 205. STATE APPLICATION.

Section 2617(b)(2) (42 U.S.C. 300ff-27(b)(2)) is amended—

(1) in subparagraph (A), by striking "and" after the semicolon;

(2) in subparagraph (B), by striking "and" after the semicolon; and

(3) by adding at the end thereof the following subparagraphs:

"(C) a description of the activities carried out by the State under section 2616; and

"(D) a description of how the allocation and utilization of resources are consistent with a

statewide coordinated statement of need, developed in partnership with other grantees in the State that receive funding under this title and after consultation with individuals receiving services under this part."

SEC. 206. ALLOCATION OF ASSISTANCE BY STATES; PLANNING, EVALUATION, AND ADMINISTRATION.

Section 2618(c) (42 U.S.C. 300ff-28(c)) is amended—

(1) by striking paragraph (1);

(2) by redesignating paragraphs (2) through (5) as paragraphs (1) through (4), respectively; and

(3) in paragraph (3) (as so redesignated), by adding at the end the following sentences: "In the case of entities to which the State allocates amounts received by the State under the grant (including consortia under section 2613), the State shall ensure that, of the aggregate amount so allocated, the total of the expenditures by such entities for administrative expenses does not exceed 10 percent (without regard to whether particular entities expend more than 10 percent for such expenses)."

SEC. 207. TECHNICAL ASSISTANCE.

Section 2619 (42 U.S.C. 300ff-29) is amended by inserting before the period the following: ", including technical assistance for the development and implementation of statewide coordinated statements of need".

TITLE III—EARLY INTERVENTION SERVICES

SEC. 301. ESTABLISHMENT OF PROGRAM.

Section 2651(b) (42 U.S.C. 300ff-51(b)) is amended—

(1) in paragraph (1), by inserting before the period the following: ", and unless the applicant agrees to expend not less than 50 percent of the grant for such services that are specified in subparagraphs (B) through (E) of such paragraph"; and

(2) in paragraph (4), by inserting after "non-profit private entities" the following: "(or private for-profit entities, if such entities are the only available providers of quality HIV care in the area)".

SEC. 302. MINIMUM QUALIFICATIONS OF GRANTEES.

Section 2652(b)(1)(B) (42 U.S.C. 300ff-52(b)(1)(B)) is amended by inserting after "non-profit private entity" the following: "(or a private for-profit entity, if such an entity is the only available provider of quality HIV care in the area)".

SEC. 303. MISCELLANEOUS PROVISIONS; PLANNING AND DEVELOPMENT GRANTS.

Section 2654 (42 U.S.C. 300ff-54) is amended by adding at the end thereof the following subsection:

"(c) **PLANNING AND DEVELOPMENT GRANTS.**—

"(1) **IN GENERAL.**—The Secretary may provide planning grants, in an amount not to exceed \$50,000 for each such grant, to public and non-profit private entities for the purpose of enabling such entities to provide early intervention services.

"(2) **REQUIREMENT.**—The Secretary may award a grant to an entity under paragraph (1) only if the Secretary determines that the entity will use such grant to assist the entity in qualifying for a grant under section 2651.

"(3) **PREFERENCE.**—In awarding grants under paragraph (1), the Secretary shall give preference to entities that provide HIV primary care services in rural or underserved communities.

"(4) **LIMITATION.**—Not to exceed 1 percent of the amount appropriated for a fiscal year under section 2655 may be used to carry out this section."

SEC. 304. ADDITIONAL REQUIRED AGREEMENTS.

Section 2664(a)(1) (42 U.S.C. 300ff-64(a)(1)) is amended—

(1) in subparagraph (A), by striking "and" after the semicolon; and

(2) by adding at the end the following subparagraph:

"(C) evidence that the proposed program is consistent with the statewide coordinated statement of need and that the applicant will participate in the ongoing revision of such statement of need."

SEC. 305. AUTHORIZATION OF APPROPRIATIONS.

Section 2655 (42 U.S.C. 300ff-55) is amended by striking "\$75,000,000" and all that follows and inserting "such sums as may be necessary for each of the fiscal years 1996 through 2000."

TITLE IV—GENERAL PROVISIONS

SEC. 401. COORDINATED SERVICES AND ACCESS TO RESEARCH FOR WOMEN, INFANTS, AND CHILDREN.

(a) **IN GENERAL.**—Section 2671 (42 U.S.C. 300ff-71) is amended—

(1) in subsection (a), by amending the subsection to read as follows:

"(a) **IN GENERAL.**—

"(1) **PROGRAM OF GRANTS.**—The Secretary, acting through the Administrator of the Health Resources and Services Administration and in consultation with the Director of the National Institutes of Health, shall make grants to public and nonprofit private entities that provide primary care (directly or through contracts) for the purpose of—

"(A) providing through such entities, in accordance with this section, opportunities for women, infants, and children to be participants in research of potential clinical benefit to individuals with HIV disease; and

"(B) providing to women, infants, and children health care on an outpatient basis.

"(2) **PROVISIONS REGARDING PARTICIPATION IN RESEARCH.**—With respect to the projects of research with which an applicant under paragraph (1) is concerned, the Secretary may not make a grant under such paragraph to the applicant unless the following conditions are met:

"(A) The applicant agrees to make reasonable efforts—

"(i) to identify which of the patients of the applicant are women, infants, and children who would be appropriate participants in the projects; and

"(ii) to offer women, infants, and children the opportunity to so participate (as appropriate), including the provision of services under subsection (f).

"(B) The applicant agrees that the applicant, and the projects of research, will comply with accepted standards of protection for human subjects (including the provision of written informed consent) who participate as subjects in clinical research.

"(C) For the third or subsequent fiscal year for which a grant under such paragraph is sought by the applicant, the Secretary has determined that—

"(i) a significant number of women, infants, and children who are patients of the applicant are participating in the projects (except to the extent this clause is waived under subsection (k)); and

"(ii) the applicant, and the projects of research, have complied with the standards referred to in subparagraph (B).

"(3) **PROHIBITION.**—Receipt of services by a patient shall not be conditioned upon the consent of the patient to participate in research.

"(4) **CONSIDERATION BY SECRETARY OF CERTAIN CIRCUMSTANCES.**—In administering the requirement of paragraph (2)(C)(i), the Secretary shall take into account circumstances in which a grantee under paragraph (1) is temporarily unable to comply with the requirement for reasons beyond the control of the grantee, and shall in such circumstances provide to the grantee a reasonable period of opportunity in which to reestablish compliance with the requirement."

(2) in subsection (c), by amending the subsection to read as follows:

"(c) **PROVISIONS REGARDING CONDUCT OF RESEARCH.**—With respect to eligibility for a grant under subsection (a):

"(1) A project of research for which subjects are sought pursuant to such subsection may be

conducted by the applicant for the grant, or by an entity with which the applicant has made arrangements for purposes of the grant. The grant may not be expended for the conduct of any project of research.

"(2) The grant may not be made unless the Secretary makes the following determinations:

"(A) The applicant or other entity (as the case may be under paragraph (1)) is appropriately qualified to conduct the project of research. An entity shall be considered to be so qualified if any research protocol of the entity has been recommended for funding under this Act pursuant to technical and scientific peer review through the National Institutes of Health.

"(B) The project of research is being conducted in accordance with a research protocol to which the Secretary gives priority regarding the prevention and treatment of HIV disease in women, infants, and children. After consultation with public and private entities that conduct such research, and with providers of services under this section and recipients of such services, the Secretary shall establish a list of such protocols that are appropriate for purposes of this section. The Secretary may give priority under this subparagraph to a research protocol that is not on such list."

(3) by striking subsection (i);

(4) by redesignating subsections (g) and (h) as subsections (h) and (i), respectively;

(5) by inserting after subsection (f) the following subsection:

"(g) **ADDITIONAL PROVISIONS.**—The Secretary may not make a grant under subsection (a) unless the applicant for the grant agrees as follows:

"(1) The applicant will coordinate activities under the grant with other providers of health care services under this Act, and under title V of the Social Security Act.

"(2) The applicant will participate in the statewide coordinated statement of need under part B (where it has been initiated by the State) and in revisions of such statement."

(6) by redesignating subsection (j) as subsection (m); and

(7) by inserting before subsection (m) (as so redesignated) the following subsections:

"(j) **COORDINATION WITH NATIONAL INSTITUTES OF HEALTH.**—The Secretary shall develop and implement a plan that provides for the coordination of the activities of the National Institutes of Health with the activities carried out under this section. In carrying out the preceding sentence, the Secretary shall ensure that projects of research conducted or supported by such Institutes are made aware of applicants and grantees under this section, shall require that the projects, as appropriate, enter into arrangements for purposes of this section, and shall require that each project entering into such an arrangement inform the applicant or grantee under this section of the needs of the project for the participation of women, infants, and children.

"(k) **TEMPORARY WAIVER REGARDING SIGNIFICANT PARTICIPATION.**—

"(1) **IN GENERAL.**—In the case of an applicant under subsection (a) who received a grant under this section for fiscal year 1995, the Secretary may, subject to paragraph (2), provide to the applicant a waiver of the requirement of subsection (a)(2)(C)(i) if the Secretary determines that the applicant is making reasonable progress toward meeting the requirement.

"(2) **TERMINATION OF AUTHORITY FOR WAIVERS.**—The Secretary may not provide any waiver under paragraph (1) on or after October 1, 1998. Any such waiver provided prior to such date terminates on such date, or on such earlier date as the Secretary may specify.

"(l) **TRAINING AND TECHNICAL ASSISTANCE.**—Of the amounts appropriated under subsection (m) for a fiscal year, the Secretary may use not more than five percent to provide training and technical assistance to assist applicants and grantees under subsection (a) in complying with the requirements of this section."

(b) CONFORMING AMENDMENTS.—Section 2671 (42 U.S.C. 300ff-71) is amended—

(1) in the heading for the section, by striking “**DEMONSTRATION**” and all that follows and inserting “**COORDINATED SERVICES AND ACCESS TO RESEARCH FOR WOMEN, INFANTS, AND CHILDREN.**”;

(2) in subsection (b), by striking “pediatric patients and pregnant women” and inserting “women, infants, and children”; and

(3) in each of subsections (d) through (f), by striking “pediatric”, each place such term appears.

(c) AUTHORIZATION OF APPROPRIATIONS.—Section 2671 (42 U.S.C. 300ff-71) is amended in subsection (m) (as redesignated by subsection (a)(8)) by striking “there are” and all that follows and inserting the following: “there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 1996 through 2000.”.

SEC. 402. PROJECTS OF NATIONAL SIGNIFICANCE.

(a) IN GENERAL.—Part D of title XXVI (42 U.S.C. 300ff-71 et seq.) is amended by inserting after section 2673 the following section:

“SEC. 2673A. DEMONSTRATION PROJECTS OF NATIONAL SIGNIFICANCE.

“(a) IN GENERAL.—The Secretary shall make grants to public and nonprofit private entities (including community-based organizations and Indian tribes and tribal organizations) for the purpose of carrying out demonstration projects that provide for the care and treatment of individuals with HIV disease, and that—

“(1) assess the effectiveness of particular models for the care and treatment of individuals with such disease;

“(2) are of an innovative nature; and

“(3) have the potential to be replicated in similar localities, or nationally.

“(b) CERTAIN PROJECTS.—Demonstration projects under subsection (a) shall include the development and assessment of innovative models for the delivery of HIV services that are designed—

“(1) to address the needs of special populations (including individuals and families with HIV disease living in rural communities, adolescents with HIV disease, Native American individuals and families with HIV disease, homeless individuals and families with HIV disease, hemophiliacs with HIV disease, and incarcerated individuals with HIV disease); and

“(2) to ensure the ongoing availability of services for Native American communities to enable such communities to care for Native Americans with HIV disease.

“(c) COORDINATION.—The Secretary may not make a grant under this section unless the applicant submits evidence that the proposed program is consistent with the applicable statewide coordinated statement of need under part B, and the applicant agrees to participate in the ongoing revision process of such statement of need (where it has been initiated by the State).

“(d) REPLICATION.—The Secretary shall make information concerning successful models developed under this section available to grantees under this title for the purpose of coordination, replication, and integration.

“(e) FUNDING; ALLOCATION OF AMOUNTS.—

“(1) IN GENERAL.—Of the amounts available under this title for a fiscal year for each program specified in paragraph (2), the Secretary shall reserve 3 percent for making grants under subsection (a).

“(2) RELEVANT PROGRAMS.—The programs referred to in subsection (a) are the program under part A, the program under part B, the program under part C, the program under section 2671, the program under section 2672, and the program under section 2673.”.

(b) STRIKING OF RELATED PROVISION.—Section 2618 (42 U.S.C. 300ff-28) is amended by striking subsection (a).

SEC. 403. SPECIAL TRAINING PROJECTS.

(a) TRANSFER OF PROGRAM.—The Public Health Service Act (42 U.S.C. 201 et seq.) is amended—

(1) by transferring section 776 from the current placement of the section;

(2) by redesignating the section as section 2673B; and

(3) by inserting the section after section 2673A (as added by section 402(a)).

(b) MODIFICATIONS.—Section 2673B (as transferred and redesignated by subsection (a)) is amended—

(1) in subsection (a)(1)—

(A) by striking subparagraphs (B) and (C);

(B) by redesignating subparagraphs (A) and (D) as subparagraphs (B) and (C), respectively;

(C) by inserting before subparagraph (B) (as so redesignated) the following subparagraph:

“(A) to train health personnel, including practitioners in programs under this title and other community providers, in the diagnosis, treatment, and prevention of HIV disease, including the prevention of the perinatal transmission of the disease and including measures for the prevention and treatment of opportunistic infections;”;

(D) in subparagraph (B) (as so redesignated), by adding “and” after the semicolon; and

(E) in subparagraph (C) (as so redesignated), by striking “curricula and”;

(2) by striking subsection (c) and redesignating subsection (d) as subsection (c); and

(3) in subsection (c) (as so redesignated)—

(A) in paragraph (1)—

(i) by striking “is authorized” and inserting “are authorized”; and

(ii) by inserting before the period the following: “, and such sums as may be necessary for each of the fiscal years 1996 through 2000”; and

(B) in paragraph (2)—

(i) by striking “is authorized” and inserting “are authorized”; and

(ii) by inserting before the period the following: “, and such sums as may be necessary for each of the fiscal years 1996 through 2000”.

SEC. 404. EVALUATIONS AND REPORTS.

Section 2674 (42 U.S.C. 300ff-74) is amended—

(1) in subsection (b)—

(A) in the matter preceding paragraph (1), by striking “not later than 1 year” and all that follows through “title,” and inserting the following: “not later than October 1, 1996,”;

(B) by striking paragraphs (1) through (3) and inserting the following paragraph:

“(1) evaluating the programs carried out under this title; and”;

(C) by redesignating paragraph (4) as paragraph (2); and

(2) by adding at the end the following subsection:

“(d) ALLOCATION OF FUNDS.—The Secretary shall carry out this section with amounts available under section 241. Such amounts are in addition to any other amounts that are available to the Secretary for such purpose.”.

SEC. 405. COORDINATION OF PROGRAM.

Section 2675 of the Public Health Service Act (42 U.S.C. 300ff-75) is amended by adding at the end the following subsection:

“(d) ANNUAL REPORT.—Not later than October 1, 1996, and annually thereafter, the Secretary shall submit to the appropriate committees of the Congress a report concerning coordination efforts under this title at the Federal, State, and local levels, including a statement of whether and to what extent there exist Federal barriers to integrating HIV-related programs.”.

TITLE V—ADDITIONAL PROVISIONS

SEC. 501. AMOUNT OF EMERGENCY RELIEF GRANTS.

Paragraph (3) of section 2603(a) (42 U.S.C. 300ff-13(a)(3)) is amended to read as follows:

“(3) AMOUNT OF GRANT.—

“(A) IN GENERAL.—Subject to the extent of amounts made available in appropriations Acts, a grant made for purposes of this paragraph to

an eligible area shall be made in an amount equal to the product of—

“(i) an amount equal to the amount available for distribution under paragraph (2) for the fiscal year involved; and

“(ii) the percentage constituted by the ratio of the distribution factor for the eligible area to the sum of the respective distribution factors for all eligible areas.

“(B) DISTRIBUTION FACTOR.—For purposes of subparagraph (A)(ii), the term ‘distribution factor’ means the product of—

“(i) an amount equal to the estimated number of living cases of acquired immune deficiency syndrome in the eligible area involved, as determined under subparagraph (C); and

“(ii) the cost index for the eligible area involved, as determined under subparagraph (D).

“(C) ESTIMATE OF LIVING CASES.—The amount determined in this subparagraph is an amount equal to the product of—

“(i) the number of cases of acquired immune deficiency syndrome in the eligible area during each year in the most recent 120-month period for which data are available with respect to all eligible areas, as indicated by the number of such cases reported to and confirmed by the Director of the Centers for Disease Control and Prevention for each year during such period; and

“(ii) with respect to—

“(I) the first year during such period, .06;

“(II) the second year during such period, .06;

“(III) the third year during such period, .08;

“(IV) the fourth year during such period, .10;

“(V) the fifth year during such period, .16;

“(VI) the sixth year during such period, .16;

“(VII) the seventh year during such period, .24;

“(VIII) the eighth year during such period, .40;

“(IX) the ninth year during such period, .57; and

“(X) the tenth year during such period, .88.

“(D) COST INDEX.—The amount determined in this subparagraph is an amount equal to the sum of—

“(i) the product of—

“(I) the average hospital wage index reported by hospitals in the eligible area involved under section 1886(d)(3)(E) of the Social Security Act for the 3-year period immediately preceding the year for which the grant is being awarded; and

“(II) .70; and

“(ii) .30.

“(E) UNEXPENDED FUNDS.—The Secretary may, in determining the amount of a grant for a fiscal year under this paragraph, adjust the grant amount to reflect the amount of unexpended and uncanceled grant funds remaining at the end of the most recent fiscal year for which the amount of such funds can be determined using the required financial status report. The amount of any such unexpended funds shall be determined using the financial status report of the grantee.

“(F) PUERTO RICO, VIRGIN ISLANDS, GUAM.—For purposes of subparagraph (D), the cost index for an eligible area within Puerto Rico, the Virgin Islands, or Guam shall be 1.0.”.

SEC. 502. AMOUNT OF CARE GRANTS.

Section 2618 (42 U.S.C. 300ff-28), as amended by section 402(b), is amended by striking subsection (b) and inserting the following subsections:

“(a) AMOUNT OF GRANT.—

“(1) IN GENERAL.—Subject to subsection (b) (relating to minimum grants), the amount of a grant under this part for a State for a fiscal year shall be the sum of—

“(A) the amount determined for the State under paragraph (2); and

“(B) the amount determined for the State under paragraph (4) (if applicable).

“(2) PRINCIPAL FORMULA GRANTS.—For purposes of paragraph (1)(A), the amount determined under this paragraph for a State for a fiscal year shall be the product of—

"(A) the amount available under section 2677 for carrying out this part, less the reservation of funds made in paragraph (4)(A) and less any other applicable reservation of funds authorized or required in this Act (which amount is subject to subsection (b)); and

"(B) the percentage constituted by the ratio of—

"(i) the distribution factor for the State; to

"(ii) the sum of the distribution factors for all States.

"(3) DISTRIBUTION FACTOR FOR PRINCIPAL FORMULA GRANTS.—For purposes of paragraph (2)(B), the term 'distribution factor' means the following, as applicable:

"(A) In the case of each of the 50 States, the District of Columbia, and the Commonwealth of Puerto Rico, the product of—

"(i) the number of cases of acquired immune deficiency syndrome in the State, as indicated by the number of cases reported to and confirmed by the Secretary for the 2 most recent fiscal years for which such data are available; and

"(ii) the cube root of the ratio (based on the most recent available data) of—

"(I) the average per capita income of individuals in the United States (including the territories); to

"(II) the average per capita income of individuals in the State.

"(B) In the case of a territory of the United States (other than the Commonwealth of Puerto Rico), the number of additional cases of such syndrome in the specific territory, as indicated by the number of cases reported to and confirmed by the Secretary for the 2 most recent fiscal years for which such data are available.

"(4) SUPPLEMENTAL AMOUNTS FOR CERTAIN STATES.—For purposes of paragraph (1)(B), an amount shall be determined under this paragraph for each State that does not contain any metropolitan area whose chief elected official received a grant under part A for fiscal year 1996. The amount determined under this paragraph for such a State for a fiscal year shall be the product of—

"(A) an amount equal to 7 percent of the amount available under section 2677 for carrying out this part for the fiscal year (subject to subsection (b)); and

"(B) the percentage constituted by the ratio of—

"(i) the number of cases of acquired immune deficiency syndrome in the State (as determined under paragraph (3)(A)(i)); to

"(ii) the sum of the respective numbers determined under clause (i) for each State to which this paragraph applies.

"(5) DEFINITIONS.—For purposes of this subsection and subsection (b):

"(A) The term 'State' means each of the 50 States, the District of Columbia, and the territories of the United States.

"(B) The term 'territory of the United States' means each of the Virgin Islands, Guam, American Samoa, the Commonwealth of the Northern Mariana Islands, the Commonwealth of Puerto Rico, and the Republic of the Marshall Islands.

"(b) MINIMUM AMOUNT OF GRANT.—

"(1) IN GENERAL.—Subject to the extent of the amounts specified in paragraphs (2)(A) and (4)(A) of subsection (a), a grant under this part for a State for a fiscal year shall be the greater of—

"(A) the amount determined for the State under subsection (a); and

"(B) the amount applicable under paragraph (2) to the State.

"(2) APPLICABLE AMOUNT.—For purposes of paragraph (1)(B), the amount applicable under this paragraph for a fiscal year is the following:

"(A) In the case of the 50 States, the District of Columbia, and the Commonwealth of Puerto Rico—

"(i) \$100,000, if it has less than 90 cases of acquired immune deficiency syndrome (as determined under subsection (a)(3)(A)(i)); and

"(ii) \$250,000, if it has 90 or more such cases (as so determined).

"(B) In the case of each of the territories of the United States (other than the Commonwealth of Puerto Rico), \$0.0."

SEC. 503. CONSOLIDATION OF AUTHORIZATIONS OF APPROPRIATIONS.

(a) IN GENERAL.—Part D of title XXVI (42 U.S.C. 300ff-71) is amended by adding at the end thereof the following section:

"SEC. 2677. AUTHORIZATION OF APPROPRIATIONS.

"(a) IN GENERAL.—For the purpose of carrying out parts A and B, there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 1996 through 2000. Subject to section 2673A and to subsection (b), of the amount appropriated under this section for a fiscal year, the Secretary shall make available 64 percent of such amount to carry out part A and 36 percent of such amount to carry out part B.

"(b) DEVELOPMENT OF METHODOLOGY.—With respect to each of the fiscal years 1997 through 2000, the Secretary may develop and implement a methodology for adjusting the percentages referred to in subsection (a)."

(b) REPEALS.—Sections 2608 and 2620 (42 U.S.C. 300ff-18 and 300ff-30) are repealed.

(c) CONFORMING AMENDMENTS.—Section 2605(d)(1) (as redesignated by section 105(3)), is amended by striking "2608" and inserting "2677".

SEC. 504. ADDITIONAL PROVISIONS.

(a) DEFINITIONS.—Section 2676(4) (42 U.S.C. 300ff-76(4)) is amended by inserting "funeral-service practitioners," after "emergency medical technicians,".

(b) MISCELLANEOUS AMENDMENT.—Section 1201(a) (42 U.S.C. 300d(a)) is amended in the matter preceding paragraph (1) by striking "The Secretary," and all that follows through "shall," and inserting "The Secretary shall,".

(c) TECHNICAL CORRECTIONS.—Title XXVI (42 U.S.C. 300ff-11 et seq.) is amended—

(1) in section 2601(a), by inserting "section" before "2604";

(2) in section 2603(b)(4)(B), by striking "an expedited grants" and inserting "an expedited grant";

(3) in section 2617(b)(3)(B)(iv), by inserting "section" before "2615";

(4) in section 2618(b)(1)(B), by striking "paragraph 3" and inserting "paragraph (3)";

(5) in section 2647—

(A) in subsection (a)(1), by inserting "to" before "HIV";

(B) in subsection (c), by striking "section 2601" and inserting "section 2641"; and

(C) in subsection (d)—

(i) in the matter preceding paragraph (1), by striking "section 2601" and inserting "section 2641"; and

(ii) in paragraph (1), by striking "has in place" and inserting "will have in place";

(6) in section 2648—

(A) by converting the heading for the section to boldface type; and

(B) by redesignating the second subsection (g) as subsection (h);

(7) in section 2649—

(A) in subsection (b)(1), by striking "subsection (a) of"; and

(B) in subsection (c)(1), by striking "this subsection" and inserting "subsection";

(8) in section 2651—

(A) in subsection (b)(3)(B), by striking "facility" and inserting "facilities"; and

(B) in subsection (c), by striking "exist" and inserting "exists";

(9) in section 2676—

(A) in paragraph (2), by striking "section" and all that follows through "by the" and inserting "section 2686 by the"; and

(B) in paragraph (10), by striking "673(a)" and inserting "673(2)";

(10) in part E, by converting the headings for subparts I and II to Roman typeface; and

(11) in section 2684(b), in the matter preceding paragraph (1), by striking "section 2682(d)(2)" and inserting "section 2683(d)(2)".

TITLE VI—EFFECTIVE DATE

SEC. 601. EFFECTIVE DATE.

Except as provided in section 101(a), this Act takes effect October 1, 1995.

Amend the title so as to read: "An Act to amend the Public Health Service Act to revise and extend programs established pursuant to the Ryan White Comprehensive AIDS Resources Emergency Act of 1990."

Mr. DOLE. Mr. President, I move that the Senate disagree to the House amendments and request a conference on the disagreeing votes of the two Houses, and that the Chair be authorized to appoint conferees on the part of the Senate.

The motion was agreed to, and the Presiding Officer appointed Mrs. KASSEBAUM, Mr. JEFFORDS, Mr. FRIST, Mr. KENNEDY, and Mr. DODD conferees on the part of the Senate.

APPOINTMENT OF CONFEREES— H.R. 2076

The PRESIDING OFFICER. Mr. President, I understand that pursuant to the order of September 29, 1995, the Chair is authorized to appoint conferees on the part of the Senate for H.R. 2076, the Commerce, Justice, State appropriations bill for fiscal year 1996.

The PRESIDING OFFICER appointed Mr. GREGG, Mr. HATFIELD, Mr. STEVENS, Mr. DOMENICI, Mr. MCCONNELL, Mr. JEFFORDS, Mr. COCHRAN, Mr. HOLINGS, Mr. BYRD, Mr. INOUE, Mr. BUMPERS, Mr. LAUTENBERG, and Mr. KERREY of Nebraska conferees on the part of the Senate.

JERUSALEM EMBASSY RELOCATION IM- DING OFFICER appointed Mr. GREGG, Mr. HATFIELD, Mr. S.

Mr. DOLE. Mr. President, I understand that S. 1322, introduced earlier by myself is at the desk.

The PRESIDING OFFICER. The Senator is correct.

The clerk will read the bill for the first time.

The bill (S. 1322) was read the first time.

Mr. DOLE. Mr. President, I ask for its second reading.

Mr. BYRD. Mr. President, I have been asked to object and do object.

The PRESIDING OFFICER. Objection is heard.

Mr. DOLE. Mr. President, as indicated, I have introduced S. 1322, the Jerusalem Embassy Relocation Act of 1995. I am pleased to do so with the distinguished senior Senator from New York, Senator MOYNIHAN, as the lead cosponsor. As the Senate knows, Senator MOYNIHAN has been the expert and the leader on Jerusalem for his entire career. I am pleased that he has joined with Senator KYL, Senator INOUE and other cosponsors in this important legislation. I would like to take special note of the roles of Senator KYL and Senator INOUE in developing this legislation, and in agreeing to the changes included today.

This legislation is very similar to S. 770, introduced on May 9, 1995. S. 770